

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

ADDRESS (number and street) PO BOX 1131  
 Check if different than previously reported. (ACC)  
ANDERSON IN 46015

2. **FEC IDENTIFICATION NUMBER** C00383927  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)  
**CITY** **STATE** **ZIP CODE**

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 07 01 2006 through 09 30 2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Steve Ford

Signature of Treasurer Electronically Filed by Steve Ford Date 10 13 2006

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		5477.63
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	7564.02									
(c) Total Receipts (from Line 19) .....	117146.80	139179.87								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	124710.82	144657.50								
7. Total Disbursements (from Line 31) .....	115313.23	135259.91								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	9397.59	9397.59								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	95605.98	102355.98
(i) Itemized (use Schedule A) .....	1020.00	1295.00
(ii) Unitemized .....	96625.98	103650.98
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	20500.00	35500.00
(c) Other Political Committees (such as PACs) .....	117125.98	139150.98
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....		
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	20.82	28.89
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	117146.80	139179.87
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	117146.80	139179.87

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	6313.23	20259.91
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	6313.23	20259.91
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	109000.00	115000.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	115313.23	135259.91
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	115313.23	135259.91

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3 .....	117125.98	139150.98
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	117125.98	139150.98
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	6313.23	20259.91
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	6313.23	20259.91

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 53
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. James Ackerman</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 01 / 2006
Mailing Address 8910 Purdue Rd., Ste. 690		<b>Transaction ID: SA11A1.5210</b>
City Indianapolis	State IN	Zip Code 46268
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer Cardinal Ventures	Occupation Owner	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. R. Donald Bell</b>		Date of Receipt M M / D D / Y Y Y Y Y 08 / 29 / 2006
Mailing Address 4715 N. Nebo Rd. 400 W.		<b>Transaction ID: SA11A1.5184</b>
City Muncie	State IN	Zip Code 47304
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2000.00
Name of Employer Retired	Occupation Retired	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>C. Josh Bradbury</b>		Date of Receipt M M / D D / Y Y Y Y Y 08 / 31 / 2006
Mailing Address 26 Shoreline		<b>Transaction ID: SA11A1.5188</b>
City Newport Coast	State CA	Zip Code 92657
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 5000.00
Name of Employer Teaze of California Inc.	Occupation Owner	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	8000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 53
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Susan Bradbury

Mailing Address 26 Shoreline

City State Zip Code  
Newport Coast CA 92657

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Homemaker Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
08 / 31 / 2006

Transaction ID: SA11A1.5190

Amount of Each Receipt this Period  
5000.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
Ronald Chance

Mailing Address 19303 Flippin Road

City State Zip Code  
Westfield IN 46074

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
08 / 29 / 2006

Transaction ID: SA11A1.5185

Amount of Each Receipt this Period  
250.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
Carolyn Charlton

Mailing Address 1170 Pintail Ct.

City State Zip Code  
Columbus IN 47201

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Cornerstone Dev. Co. LLC Real Estate Developer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
09 / 07 / 2006

Transaction ID: SA11A1.5219

Amount of Each Receipt this Period  
250.00

Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	5500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 53
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Michael Cox

Mailing Address 905 Meadow Ln.

City State Zip Code  
Muncie IN 47304

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
First Merchants Bank Banker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 25 / 2006

Transaction ID: SA11A1.5164

Amount of Each Receipt this Period  
500.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
E. Mark Deister

Mailing Address 13110 Aboite Center Rd.

City State Zip Code  
Fort Wayne IN 46814

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Deister Machine Inc. Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 01 / 2006

Transaction ID: SA11A1.5208

Amount of Each Receipt this Period  
2500.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
Helen Dick

Mailing Address 9085 E SR 334

City State Zip Code  
Zionsville IN 46077

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Homemaker Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 31 / 2006

Transaction ID: SA11A1.5192

Amount of Each Receipt this Period  
1000.00

Contributon

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	4000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 53
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Stuart Epperson</b>		Date of Receipt MM / DD / YYYY 09 / 05 / 2006
Mailing Address 3780 Will Scarlett Rd.		Transaction ID: SA11A1.5215
City Winston Salem	State NC	Zip Code 27104
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self	Occupation Broadcasting	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) <b>B. Alice Eshelman</b>		Date of Receipt MM / DD / YYYY 09 / 01 / 2006
Mailing Address 6755 E. 900 S.		Transaction ID: SA11A1.5204
City Columbia City	State IN	Zip Code 46725
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer Joseph Decuis	Occupation Restaurateur	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>C. Peter Eshelman</b>		Date of Receipt MM / DD / YYYY 09 / 01 / 2006
Mailing Address 6755 E. 900 S.		Transaction ID: SA11A1.5202
City Columbia City	State IN	Zip Code 46725
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer American Specialty	Occupation Insurance Executive	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	11000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 53
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Janice Ball Fisher		Date of Receipt MM / DD / YYYY 08 / 25 / 2006
Mailing Address P.O. Box 1408		Transaction ID: SA11A1.5166
City Muncie	State IN	Zip Code 47308
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Retired	Occupation Retired	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B.</b> John Fisher		Date of Receipt MM / DD / YYYY 08 / 25 / 2006
Mailing Address P.O. Box 1408		Transaction ID: SA11A1.5167
City Muncie	State IN	Zip Code 47308
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Retired	Occupation Retired	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Jerry Hardacre		Date of Receipt MM / DD / YYYY 09 / 05 / 2006
Mailing Address 1905 Winding Way		Transaction ID: SA11A1.5216
City Anderson	State IN	Zip Code 46011
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Retired	Occupation Retired	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 53
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Tom Holthouse

Mailing Address 2074 Minneman Rd.

City Richmond State IN Zip Code 47374

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	7	/	2	0	0	6

Transaction ID: SA11A1.5217

Amount of Each Receipt this Period  
1000.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
Diane Humphrey

Mailing Address 2279 East 250 North

City Bluffton State IN Zip Code 46714

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	5	/	2	0	0	6

Transaction ID: SA11A1.5155

Amount of Each Receipt this Period  
1000.00

contribution

**C.** Full Name (Last, First, Middle Initial)  
Thomas Irscher

Mailing Address 10401 Mohawk Court

City Fort Wayne State IN Zip Code 46804

FEC ID number of contributing federal political committee. **C**

Name of Employer Irscher, Inc. Occupation Contractor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	1	/	2	0	0	6

Transaction ID: SA11A1.5194

Amount of Each Receipt this Period  
1000.00

Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 53
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Thomas Irmischer</b>		Date of Receipt MM / DD / YYYY 09 / 20 / 2006
Mailing Address 10401 Mohawk Court		<b>Transaction ID: SA11A1.5238</b>
City Fort Wayne	State IN	Zip Code 46804
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 4000.00	
Name of Employer Irmischer, Inc.	Occupation Contractor	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>B. David Kirr</b>		Date of Receipt MM / DD / YYYY 09 / 11 / 2006
Mailing Address 3665 Woodside Dr.		<b>Transaction ID: SA11A1.5222</b>
City Columbus	State IN	Zip Code 47203
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 5000.00	
Name of Employer KM & Co.	Occupation Investment Manager	Contributor
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>C. Fred Klipsch</b>		Date of Receipt MM / DD / YYYY 09 / 21 / 2006
Mailing Address 3502 Woodview Trace Suite 200		<b>Transaction ID: SA11A1.5241</b>
City Indianapolis	State IN	Zip Code 46268
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 5000.00	
Name of Employer Klipsch Audio Technologies	Occupation Owner	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	14000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 53
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Byron Lamm

Mailing Address 830 Mill Lake Rd.

City State Zip Code  
Ft. Wayne IN 46845

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Pin Oak Group LLC Investments

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1855.98

Date of Receipt  
MM / DD / YYYY  
08 / 31 / 2006

Transaction ID: SA11A1.5260

Amount of Each Receipt this Period  
1855.98

In-kind - Catering and facility fees

**B.** Full Name (Last, First, Middle Initial)  
Byron Lamm

Mailing Address 830 Mill Lake Rd.

City State Zip Code  
Ft. Wayne IN 46845

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Pin Oak Group LLC Investments

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2855.98

Date of Receipt  
MM / DD / YYYY  
09 / 07 / 2006

Transaction ID: SA11A1.5220

Amount of Each Receipt this Period  
1000.00

Contributor

**C.** Full Name (Last, First, Middle Initial)  
Harold Levy

Mailing Address 15 Charcoal Hill Rd.

City State Zip Code  
Westport CT 06880

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Fridian Finance

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2000.00

Date of Receipt  
MM / DD / YYYY  
09 / 22 / 2006

Transaction ID: SA11A1.5242

Amount of Each Receipt this Period  
2000.00

Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	4855.98
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 53
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> P.E. MacAllister		Date of Receipt M M / D D / Y Y Y Y 08 / 29 / 2006	
Mailing Address 7515 W. 30th St.		Transaction ID: SA11A1.5182	
City Indianapolis	State IN	Zip Code 46219	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer MacAllister Machinery Co., Inc	Occupation Chairman	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B.</b> Laurel Martin		Date of Receipt M M / D D / Y Y Y Y 09 / 05 / 2006	
Mailing Address 1690 Cielito Drive		Transaction ID: SA11A1.5214	
City Glendale	State CA	Zip Code 91207	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Retired	Occupation Retired	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C.</b> Donald McArdle		Date of Receipt M M / D D / Y Y Y Y 08 / 31 / 2006	
Mailing Address 3530 Rosewood Drive		Transaction ID: SA11A1.5193	
City Fort Wayne	State IN	Zip Code 46804	Amount of Each Receipt this Period 2000.00
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer McArdle Realty & Consulting	Occupation Consultant	Aggregate Year-to-Date ▼ 2000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	4000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 53
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Christine Merchant</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 14 / 2006	
Mailing Address 5835 W. 74th St.		Transaction ID: SA11A1.5503	
City Indianapolis	State IN	Zip Code 46278	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. <b>C</b>		Contribution	
Name of Employer Self	Occupation Entrepreneur		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>B. Maxine Mosey</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 28 / 2006	
Mailing Address 3535 Niewoehner Rd.		Transaction ID: SA11A1.5172	
City Richmond	State IN	Zip Code 47374	Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. <b>C</b>		Contribution	
Name of Employer Homemaker	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

Full Name (Last, First, Middle Initial) <b>C. Oscar U. Mutz</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 28 / 2006	
Mailing Address 5119 Lake in the Woods Blvd.		Transaction ID: SA11A1.5178	
City Lakeland	State FL	Zip Code 33813	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. <b>C</b>		Contribution	
Name of Employer Mutz Group	Occupation Merchant Banker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	8500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty field)

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 53
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> John Popp		Date of Receipt M M / D D / Y Y Y Y 09 / 01 / 2006
Mailing Address 12316 Aboite Center Rd.		Transaction ID: SA11A1.5206
City State Zip Code Fort Wayne IN 46814	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Occupation Perfection Bakery Inc. Bakery Executive	Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Rolene Popp		Date of Receipt M M / D D / Y Y Y Y 09 / 01 / 2006
Mailing Address 12316 Aboite Center Rd.		Transaction ID: SA11A1.5195
City State Zip Code Fort Wayne IN 46814	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Occupation Homemaker Homemaker	Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Rolene Popp		Date of Receipt M M / D D / Y Y Y Y 09 / 01 / 2006
Mailing Address 12316 Aboite Center Rd.		Transaction ID: SA11A1.5197
City State Zip Code Fort Wayne IN 46814	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Occupation Homemaker Homemaker	Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	4000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 53
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Grant Porter		Date of Receipt MM / DD / YYYY 08 / 25 / 2006
Mailing Address 1501 High Street		Transaction ID: SA11A1.5169
City Decatur	State IN	Zip Code 46733
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Porter Inc.	Occupation Manager	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Edward Probst		Date of Receipt MM / DD / YYYY 09 / 20 / 2006
Mailing Address 1920 Franklin St.		Transaction ID: SA11A1.5237
City Columbus	State IN	Zip Code 47201
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Retired	Occupation Retired	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. A. Russell Quilhot		Date of Receipt MM / DD / YYYY 09 / 25 / 2006
Mailing Address 9464 S. 700 E-92		Transaction ID: SA11A1.5244
City Roanoke	State IN	Zip Code 46783
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 3000.00
Name of Employer Retired	Occupation Retired	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	4500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 53
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) David Quilhot Mailing Address 15331 Longview Cv. City State Zip Code Fort Wayne IN 46814 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 25 / 2006 <b>Transaction ID: SA11A1.5158</b> Amount of Each Receipt this Period 1000.00 Contribution
Name of Employer Self Occupation Self Real Estate Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Deborah Quilhot Mailing Address 15331 Longview Cv. City State Zip Code Fort Wayne IN 46814 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 25 / 2006 <b>Transaction ID: SA11A1.5156</b> Amount of Each Receipt this Period 1000.00 Contribution
Name of Employer Self Occupation Self Real Estate Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Jeanette Quilhot Mailing Address 9464 S. 700 East 92 City State Zip Code Roanoke IN 46783 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 01 / 2006 <b>Transaction ID: SA11A1.5198</b> Amount of Each Receipt this Period 2000.00 Contribution
Name of Employer Retired Occupation Retired Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	4000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 53
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Sarah Quilhot		Date of Receipt MM / DD / YYYY 09 / 01 / 2006
Mailing Address 12511 Rockridge Pl.		Transaction ID: SA11A1.5200
City Fort Wayne	State IN	Zip Code 46814
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 1000.00	
Name of Employer Self	Occupation Volunteer	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Thomas Reilly, Jr.		Date of Receipt MM / DD / YYYY 08 / 25 / 2006
Mailing Address 8877 Pickwick Dr.		Transaction ID: SA11A1.5163
City Indianapolis	State IN	Zip Code 46260
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 1000.00	
Name of Employer Reilly Industries Inc.	Occupation Chairman	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Cathleen Rooney		Date of Receipt MM / DD / YYYY 09 / 14 / 2006
Mailing Address 5835 W. 74th		Transaction ID: SA11A1.5505
City Indianapolis	State IN	Zip Code 46278
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 5000.00	
Name of Employer Homemaker	Occupation Homemaker	contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	7000.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 53
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Therese Rooney		Date of Receipt M M / D D / Y Y Y Y 09 / 14 / 2006	
Mailing Address 7720 N. College Ave.		Transaction ID: SA11A1.5507	
City Indianapolis	State IN	Zip Code 46240	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. <b>C</b>		contribution	
Name of Employer Golden Rule Financial	Occupation Chairwoman/CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Dr. Herbert Rosen		Date of Receipt M M / D D / Y Y Y Y 09 / 13 / 2006	
Mailing Address 244 MELBA LANE		Transaction ID: SA11A1.5227	
City HIGHLAND PARK	State IL	Zip Code 60035	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. <b>C</b>		Contribution	
Name of Employer RETIRED		Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>C.</b> T. Alan Russell		Date of Receipt M M / D D / Y Y Y Y 08 / 28 / 2006	
Mailing Address 8 Waters Edge Dr.		Transaction ID: SA11A1.5176	
City Paris	State IL	Zip Code 61944	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. <b>C</b>		Contribution	
Name of Employer Liberty Fund, Inc.		Occupation Education Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	7000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 53
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Jeanette Schouweiler

Mailing Address 4501 Taylor St.

City State Zip Code  
Fort Wayne IN 46804

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Homemaker Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
08 / 30 / 2006

Transaction ID: SA11A1.5186

Amount of Each Receipt this Period  
500.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
Patrick Sprunger

Mailing Address 5915 Heywood Cove

City State Zip Code  
Fort Wayne IN 46815

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Simplex Grinnell Sales Rep.

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
09 / 11 / 2006

Transaction ID: SA11A1.5225

Amount of Each Receipt this Period  
500.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
Nathan Wagner

Mailing Address 1269 Waters Edge Lane

City State Zip Code  
Northbrook IL 60062

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Jel Management Corp. Accountant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
09 / 11 / 2006

Transaction ID: SA11A1.5223

Amount of Each Receipt this Period  
1000.00

Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 22 / 53
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Dianne Witwer

Mailing Address 300 S. State Rd. 201

City State Zip Code  
Bluffton IN 46714

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
News Banner Publ. Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
09 / 18 / 2006

Transaction ID: SA11A1.5234

Amount of Each Receipt this Period  
1000.00

Contributor

**B.** Full Name (Last, First, Middle Initial)  
Russell Wurster

Mailing Address 8463 Castlewood Dr.

City State Zip Code  
Indianapolis IN 46250

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Royal Pin Liesure Centers President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
08 / 22 / 2006

Transaction ID: SA11A1.5153

Amount of Each Receipt this Period  
1000.00

Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	2000.00
<b>TOTAL</b> This Period (last page this line number only) .....	95605.98

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 53  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
DEAN FOODS COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 2515 McKinney Avenue Suite 1200

City State Zip Code  
Dallas TX 75201

FEC ID number of contributing federal political committee. **C** C00340083

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 29 / 2006

Transaction ID: SA11C.5249

Amount of Each Receipt this Period  
5000.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
KOCH INDUSTRIES INC POLITICAL ACTION COMMITTEE (KOCHPAC)

Mailing Address 655 15th Street NW Suite 445

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00236489

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 29 / 2006

Transaction ID: SA11C.5247

Amount of Each Receipt this Period  
2500.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
NATIONAL RIGHT TO WORK COMMITTEE PAC, THE

Mailing Address 8001 Braddock Road Suite 500

City State Zip Code  
North Springfield VA 22151

FEC ID number of contributing federal political committee. **C** C00395533

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 18 / 2006

Transaction ID: SA11C.5229

Amount of Each Receipt this Period  
5000.00

Contributor

**SUBTOTAL** of Receipts This Page (optional) ..... ► **12500.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 53
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. ORACLE CORPORATION POLITICAL ACTION COMMITTEE</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 18 / 2006
Mailing Address 1015 15th Street Northwest Suite 200		<b>Transaction ID:</b> SA11C.5231
City Washington State DC Zip Code 20005	FEC ID number of contributing federal political committee. <b>C</b> C00323048	Amount of Each Receipt this Period 1000.00
Name of Employer Occupation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Contributor
Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>B. UBS AMERICAS FUND FOR BETTER GOVERNMENT</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 29 / 2006
Mailing Address 1285 AVENUE OF THE AMERICAS		<b>Transaction ID:</b> SA11C.5251
City NEW YORK State NY Zip Code 10019	FEC ID number of contributing federal political committee. <b>C</b> C00012245	Amount of Each Receipt this Period 5000.00
Name of Employer Occupation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	contribution
Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>C. WALT DISNEY PRODUCTIONS EMPLOYEES PAC (DISNEY EMPLOYEES POLITICAL ACTION COMMITTEE)</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 30 / 2006
Mailing Address 1150 17TH STREET NW SUITE 400		<b>Transaction ID:</b> SA11C.5258
City WASHINGTON State DC Zip Code 20036	FEC ID number of contributing federal political committee. <b>C</b> C00197749	Amount of Each Receipt this Period 2000.00
Name of Employer Occupation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Contribution
Aggregate Year-to-Date ▼ 2000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>8000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>20500.00</b>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 25 / 53

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Advantage Payroll</b>		<b>Transaction ID:</b> SB21B.5489																					
Mailing Address 2905 E. 46th St		Date of Disbursement																					
City Indianapolis State IN Zip Code 46205		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	1		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		2	1		2	0	0	6														
Purpose of Disbursement 001 payroll service		Amount of Each Disbursement this Period																					
Candidate Name		<table border="1"> <tr> <td colspan="10">135.00</td> </tr> </table>		135.00																			
135.00																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																					
State: District:		<input type="checkbox"/> Other (specify) ▼																					
Category/Type: 001																							

Full Name (Last, First, Middle Initial) <b>B. Advantage Payroll</b>		<b>Transaction ID:</b> SB21B.5490																					
Mailing Address 2905 E. 46th St		Date of Disbursement																					
City Indianapolis State IN Zip Code 46205		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		3	1		2	0	0	6														
Purpose of Disbursement 001 payroll taxes		Amount of Each Disbursement this Period																					
Candidate Name		<table border="1"> <tr> <td colspan="10">1382.15</td> </tr> </table>		1382.15																			
1382.15																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																					
State: District:		<input type="checkbox"/> Other (specify) ▼																					
Category/Type: 001																							

Full Name (Last, First, Middle Initial) <b>C. Advantage Payroll</b>		<b>Transaction ID:</b> SB21B.5491																					
Mailing Address 2905 E. 46th St		Date of Disbursement																					
City Indianapolis State IN Zip Code 46205		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		3	1		2	0	0	6														
Purpose of Disbursement 001 payroll taxes		Amount of Each Disbursement this Period																					
Candidate Name		<table border="1"> <tr> <td colspan="10">197.83</td> </tr> </table>		197.83																			
197.83																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																					
State: District:		<input type="checkbox"/> Other (specify) ▼																					
Category/Type: 001																							

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	<b>1714.98</b>
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ron Arnold</b>		<b>Transaction ID: SB21B.5497</b> Date of Disbursement 09 / 25 / 2006
Mailing Address 3709 Tulip Street		Amount of Each Disbursement this Period 208.95
City Anderson State IN Zip Code 46011	Purpose of Disbursement 002 travel reimbursement Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 002

Full Name (Last, First, Middle Initial) <b>B. David Cantwell</b>		<b>Transaction ID: SB21B.5485</b> Date of Disbursement 09 / 22 / 2006
Mailing Address 1526		Amount of Each Disbursement this Period 1225.00
City Indianapolis State IN Zip Code 46260	Purpose of Disbursement 001 telephone equipment Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001

Full Name (Last, First, Middle Initial) <b>C. David Cantwell</b>		<b>Transaction ID: SB21B.5495</b> Date of Disbursement 09 / 22 / 2006
Mailing Address 1526		Amount of Each Disbursement this Period 169.90
City Indianapolis State IN Zip Code 46260	Purpose of Disbursement 001 IP telephone service Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1603.85
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 27 / 53

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Byron Lamm</b>		<b>Transaction ID: SB21B.5261</b> Date of Disbursement																					
Mailing Address 830 Mill Lake Rd.		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		3	1		2	0	0	6														
City Ft. Wayne	State IN	Zip Code 46845																					
Purpose of Disbursement In-kind - Catering and facility fees		<table border="1"> <tr> <td>003</td> </tr> </table>		003																			
003																							
Candidate Name		Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: District:																							

Amount of Each Disbursement this Period  
1855.98

Full Name (Last, First, Middle Initial) <b>B. Office Depot</b>		<b>Transaction ID: SB21B.5480</b> Date of Disbursement																					
Mailing Address 3632 Scatterfield		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	4		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		1	4		2	0	0	6														
City Anderson	State IN	Zip Code 46013																					
Purpose of Disbursement 001 Office Equipment		<table border="1"> <tr> <td>003</td> </tr> </table>		003																			
003																							
Candidate Name		Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: District:																							

Amount of Each Disbursement this Period  
339.95

Full Name (Last, First, Middle Initial) <b>C. SBC</b>		<b>Transaction ID: SB21B.5493</b> Date of Disbursement																					
Mailing Address 220 N. Meridian Street		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	0		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	7		2	0		2	0	0	6														
City Indianapolis	State IN	Zip Code 46204																					
Purpose of Disbursement 001 telephone		<table border="1"> <tr> <td>001</td> </tr> </table>		001																			
001																							
Candidate Name		Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: District:																							

Amount of Each Disbursement this Period  
136.24

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2332.17</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 28 / 53

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

<b>A. SBC</b> Full Name (Last, First, Middle Initial) Mailing Address 220 N. Meridian Street City Indianapolis State IN Zip Code 46204 Purpose of Disbursement 001 telephone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: SB21B.5494</b> Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2006 Amount of Each Disbursement this Period 137.38 Category/Type 001
--	--	---

<b>B. Toles</b> Full Name (Last, First, Middle Initial) Mailing Address 627 Nichol Ave. City Anderson State IN Zip Code 46016 Purpose of Disbursement 003 flowers Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: SB21B.5487</b> Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2006 Amount of Each Disbursement this Period 279.31 Category/Type 003
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**SUBTOTAL** of Disbursements This Page (optional) ..... ►

416.69

**TOTAL** This Period (last page this line number only) ..... ►

6067.69

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 29 / 53

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. ADRIAN SMITH FOR CONGRESS</b>		<b>Transaction ID: SB23.5373</b> Date of Disbursement
Mailing Address 3321 AVENUE I SUITE 6		<input type="text" value="09"/> / <input type="text" value="14"/> / <input type="text" value="2006"/>
City SCOTTSBLUFF	State NE	Zip Code 69361
Purpose of Disbursement federal contribution		<input type="text" value="011"/> Category/ Type
Candidate Name ADRIAN SMITH		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NE	District: 03	

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial) <b>B. BACHMANN FOR CONGRESS</b>		<b>Transaction ID: SB23.5370</b> Date of Disbursement
Mailing Address BOX 49756		<input type="text" value="09"/> / <input type="text" value="14"/> / <input type="text" value="2006"/>
City BLAINE	State MN	Zip Code 55449
Purpose of Disbursement federal contribution		<input type="text" value="011"/> Category/ Type
Candidate Name MICHELE M BACHMANN		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MN	District: 06	

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial) <b>C. BARRETT FOR CONGRESS</b>		<b>Transaction ID: SB23.5396</b> Date of Disbursement
Mailing Address P.O. Box 869 PO BOX 869		<input type="text" value="09"/> / <input type="text" value="18"/> / <input type="text" value="2006"/>
City Westminster	State SC	Zip Code 29693
Purpose of Disbursement federal contribution		<input type="text" value="011"/> Category/ Type
Candidate Name JAMES GRESHAM BARRETT		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: SC	District: 03	

Amount of Each Disbursement this Period

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="3000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 30 / 53

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. BILIRAKIS FOR CONGRESS</b>		Transaction ID: SB23.5463 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 1 / 2 0 0 6
Mailing Address 610 S. Boulevard		Amount of Each Disbursement this Period 1000.00
City Tampa State FL Zip Code 33606	Purpose of Disbursement federal contribution Candidate Name GUS MICHAEL BILIRAKIS Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 09	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BLASDEL FOR CONGRESS</b>		Transaction ID: SB23.5460 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 1 / 2 0 0 6
Mailing Address PO BOX 479		Amount of Each Disbursement this Period 1000.00
City Lisbon State OH Zip Code 44432	Purpose of Disbursement federal contribution Candidate Name CHUCK BLASDEL Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 06	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. BRADY FOR CONGRESS</b>		Transaction ID: SB23.5435 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 8 / 2 0 0 6
Mailing Address P.O. Box 8277		Amount of Each Disbursement this Period 1000.00
City The Woodlands State TX Zip Code 77387	Purpose of Disbursement federal contribution Candidate Name KEVIN PATRICK BRADY Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 08	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. CHARLES TAYLOR FOR CONGRESS COMMITTEE</b>		<b>Transaction ID: SB23.5278</b> Date of Disbursement
Mailing Address PO Box 2355 PO Box 2355		<input type="text" value="09"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City Asheville	State NC	Zip Code 28802
Purpose of Disbursement Federal Contribution		<input type="text" value="011"/> Category/ Type
Candidate Name CHARLES H TAYLOR		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NC	District: 11	

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial) <b>B. CHOCOLA FOR CONGRESS INC</b>		<b>Transaction ID: SB23.5476</b> Date of Disbursement
Mailing Address PO BOX 6728		<input type="text" value="09"/> <input type="text" value="29"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City SOUTH BEND	State IN	Zip Code 46660
Purpose of Disbursement federal contribution		<input type="text" value="011"/> Category/ Type
Candidate Name JOSEPH CHRISTOPHER CHOCOLA		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IN	District: 02	

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial) <b>C. CHRIS WAKIM FOR CONGRESS</b>		<b>Transaction ID: SB23.5448</b> Date of Disbursement
Mailing Address PO Box 2176		<input type="text" value="09"/> <input type="text" value="20"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City Wheeling	State WV	Zip Code 26003
Purpose of Disbursement federal contribution		<input type="text" value="011"/> Category/ Type
Candidate Name CHRIS WAKIM		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: WV	District: 01	

Amount of Each Disbursement this Period

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="8500.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. COLORADANS FOR RICK O'DONNELL</b>		<b>Transaction ID: SB23.5441</b> Date of Disbursement
Mailing Address PO Box 260693		<input type="text" value="09"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City Lakewood	State CO	Zip Code 80226
Purpose of Disbursement federal contribution		<input type="text" value="011"/> Category/ Type
Candidate Name RICK O'DONNELL		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CO	District: 07	

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial) <b>B. COMMITTEE TO ELECT SHERRY SMITH FOR CONGRESS</b>		<b>Transaction ID: SB23.5418</b> Date of Disbursement
Mailing Address 1038 S YOLANDA DE FONTUNA AVE		<input type="text" value="09"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City YUMA	State AZ	Zip Code 85367
Purpose of Disbursement federal contribution		<input type="text" value="011"/> Category/ Type
Candidate Name SHERRY LYNN SMITH		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: AZ	District: 07	

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial) <b>C. CUBIN FOR CONGRESS INC</b>		<b>Transaction ID: SB23.5287</b> Date of Disbursement
Mailing Address POST OFFICE BOX 4657 P O BOX 4657		<input type="text" value="09"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City CASPER	State WY	Zip Code 82604
Purpose of Disbursement Federal Contribution		<input type="text" value="011"/> Category/ Type
Candidate Name BARBARA L CUBIN		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: WY	District: 01	

Amount of Each Disbursement this Period

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="4500.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. DAVID DAVIS VICTORY FUND</b>		<b>Transaction ID: SB23.5444</b> Date of Disbursement
Mailing Address 2016 NORTHWOOD DRIVE		<input type="text" value="09"/> / <input type="text" value="20"/> / <input type="text" value="2006"/>
City JOHNSON CITY	State TN	Zip Code 37601
Purpose of Disbursement federal contribution		<input type="text" value="011"/> Category/ Type
Candidate Name DAVID DAVIS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: TN	District: 01	

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial) <b>B. DAVID MCSWEENEY FOR CONGRESS 2006 INC</b>		<b>Transaction ID: SB23.5391</b> Date of Disbursement
Mailing Address 8 Hubbell Court		<input type="text" value="09"/> / <input type="text" value="14"/> / <input type="text" value="2006"/>
City Barrington	State IL	Zip Code 60010
Purpose of Disbursement federal contribution		<input type="text" value="011"/> Category/ Type
Candidate Name S. DAVID MCSWEENEY		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL	District: 8	

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial) <b>C. FALLIN FOR CONGRESS</b>		<b>Transaction ID: SB23.5469</b> Date of Disbursement
Mailing Address 119 N ROBINSON SUITE 400		<input type="text" value="09"/> / <input type="text" value="21"/> / <input type="text" value="2006"/>
City OKLAHOMA CITY	State OK	Zip Code 73102
Purpose of Disbursement federal contribution		<input type="text" value="011"/> Category/ Type
Candidate Name MARY C FALLIN		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OK	District: 5	

Amount of Each Disbursement this Period

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="3000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 34 / 53

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. FITZPATRICK FOR CONGRESS</b>		<b>Transaction ID: SB23.5336</b> Date of Disbursement 09 / 05 / 2006
Mailing Address 115 N Broad Street		Amount of Each Disbursement this Period 1000.00
City Doylestown	State PA Zip Code 18901	
Purpose of Disbursement federal contribution		
Candidate Name MICHAEL G FITZPATRICK		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: PA District: 08		

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF CLAY SHAW</b>		<b>Transaction ID: SB23.5339</b> Date of Disbursement 09 / 05 / 2006
Mailing Address P.O. Box 2188 2600 NE 14th. Street Causeway		Amount of Each Disbursement this Period 1000.00
City Fort Lauderdale	State FL Zip Code 33303	
Purpose of Disbursement federal contribution		
Candidate Name E CLAY JR SHAW		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: FL District: 22		

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF DAVE REICHERT</b>		<b>Transaction ID: SB23.5318</b> Date of Disbursement 09 / 05 / 2006
Mailing Address P. O. Box 53322		Amount of Each Disbursement this Period 1000.00
City Bellevue	State WA Zip Code 98015	
Purpose of Disbursement Federal Contribution		
Candidate Name DAVE REICHERT		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: WA District: 8		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF DON SHERWOOD</b>		<b>Transaction ID: SB23.5315</b> Date of Disbursement
Mailing Address 81 WARREN STREET		<input type="text" value="09"/> / <input type="text" value="05"/> / <input type="text" value="2006"/>
City TUNKHANNOCK	State PA	Zip Code 18675
Purpose of Disbursement federal contribution	<input type="text" value="011"/> Category/ Type	
Candidate Name DONALD L. SHERWOOD		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: PA District: 10		
		Amount of Each Disbursement this Period <input type="text" value="1000.00"/>

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF FRANK WOLF</b>		<b>Transaction ID: SB23.5325</b> Date of Disbursement
Mailing Address P.O. Box 710235 P.O. Box 3015		<input type="text" value="09"/> / <input type="text" value="05"/> / <input type="text" value="2006"/>
City Oak Hill	State VA	Zip Code 20171
Purpose of Disbursement Federal Contribution	<input type="text" value="011"/> Category/ Type	
Candidate Name FRANK R WOLF		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: VA District: 10		
		Amount of Each Disbursement this Period <input type="text" value="2500.00"/>

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF JEB HENSARLING</b>		<b>Transaction ID: SB23.5405</b> Date of Disbursement
Mailing Address PO Box 820504		<input type="text" value="09"/> / <input type="text" value="18"/> / <input type="text" value="2006"/>
City Dallas	State TX	Zip Code 75382
Purpose of Disbursement federal contribution	<input type="text" value="011"/> Category/ Type	
Candidate Name JEB MR. HENSARLING		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: TX District: 05		
		Amount of Each Disbursement this Period <input type="text" value="1000.00"/>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="4500.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF JOE PITTS</b>		<b>Transaction ID: SB23.5422</b> Date of Disbursement
Mailing Address PO BOX 775		<input type="text" value="09"/> / <input type="text" value="18"/> / <input type="text" value="2006"/>
City Unionville	State PA	Zip Code 19375
Purpose of Disbursement federal contribution	<input type="text" value="011"/> Category/ Type	
Candidate Name JOSEPH R PITTS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: PA District: 16		
		Amount of Each Disbursement this Period <input type="text" value="1000.00"/>

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF MAX BURNS</b>		<b>Transaction ID: SB23.5455</b> Date of Disbursement
Mailing Address PO BOX 1965		<input type="text" value="09"/> / <input type="text" value="20"/> / <input type="text" value="2006"/>
City SYLVANIA	State GA	Zip Code 30467
Purpose of Disbursement federal contribuiton	<input type="text" value="011"/> Category/ Type	
Candidate Name OTHELL MAXIE BURNS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: GA District: 12		
		Amount of Each Disbursement this Period <input type="text" value="1000.00"/>

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF MIKE FERGUSON</b>		<b>Transaction ID: SB23.5321</b> Date of Disbursement
Mailing Address c/o Ron Gravino P.O. Box 225		<input type="text" value="09"/> / <input type="text" value="05"/> / <input type="text" value="2006"/>
City Colonia	State NJ	Zip Code 07067
Purpose of Disbursement Federal Contribution	<input type="text" value="011"/> Category/ Type	
Candidate Name MIKE FERGUSON		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NJ District: 07		
		Amount of Each Disbursement this Period <input type="text" value="5000.00"/>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="7000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF MIKE SODREL</b>		<b>Transaction ID: SB23.5472</b> Date of Disbursement
Mailing Address 702 NORTH SHORE DRIVE SUITE 500		<input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2006"/>
City JEFFERSONVILLE	State IN	Zip Code 47130
Purpose of Disbursement federal contribution	<input type="text" value="011"/> Category/ Type	
Candidate Name MICHAEL E SODREL		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IN District: 09		
		Amount of Each Disbursement this Period <input type="text" value="5000.00"/>

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF SAM JOHNSON</b>		<b>Transaction ID: SB23.5428</b> Date of Disbursement
Mailing Address 1611 Avenue K		<input type="text" value="09"/> / <input type="text" value="18"/> / <input type="text" value="2006"/>
City Plano	State TX	Zip Code 75074
Purpose of Disbursement federal contribution	<input type="text" value="011"/> Category/ Type	
Candidate Name SAMUEL ROBERT JOHNSON		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: TX District: 03		
		Amount of Each Disbursement this Period <input type="text" value="1000.00"/>

Full Name (Last, First, Middle Initial) <b>C. GEOFF DAVIS FOR CONGRESS</b>		<b>Transaction ID: SB23.5268</b> Date of Disbursement
Mailing Address 3161 Dixie Highway Suite F		<input type="text" value="09"/> / <input type="text" value="05"/> / <input type="text" value="2006"/>
City Erlanger	State KY	Zip Code 41018
Purpose of Disbursement Feeral Contribution	<input type="text" value="011"/> Category/ Type	
Candidate Name GEOFFREY C DAVIS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: KY District: 04		
		Amount of Each Disbursement this Period <input type="text" value="2500.00"/>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="8500.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. GRAF FOR CONGRESS</b>		<b>Transaction ID: SB23.5382</b> Date of Disbursement
Mailing Address 287 W EL NOPAL		<input type="text" value="09"/> / <input type="text" value="14"/> / <input type="text" value="2006"/>
City GREEN VALLEY	State AZ	Zip Code 85614
Purpose of Disbursement federal contribution	<input type="text" value="011"/> Category/ Type	
Candidate Name RANDALL RANDY GRAF		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: AZ	District: 08	
		Amount of Each Disbursement this Period <input type="text" value="1000.00"/>

Full Name (Last, First, Middle Initial) <b>B. GUTKNECHT FOR U.S. CONGRESS COMMITTEE</b>		<b>Transaction ID: SB23.5282</b> Date of Disbursement
Mailing Address P.O. Box 6428		<input type="text" value="09"/> / <input type="text" value="05"/> / <input type="text" value="2006"/>
City Rochester	State MN	Zip Code 55903
Purpose of Disbursement Federal Contribution	<input type="text" value="011"/> Category/ Type	
Candidate Name GILBERT W JR. GUTKNECHT		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MN	District: 01	
		Amount of Each Disbursement this Period <input type="text" value="2500.00"/>

Full Name (Last, First, Middle Initial) <b>C. HAYES FOR CONGRESS</b>		<b>Transaction ID: SB23.5329</b> Date of Disbursement
Mailing Address Post Office Box 2000		<input type="text" value="09"/> / <input type="text" value="05"/> / <input type="text" value="2006"/>
City Concord	State NC	Zip Code 28026
Purpose of Disbursement federal contribuion	<input type="text" value="011"/> Category/ Type	
Candidate Name ROBERT C (ROBIN) HAYES		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NC	District: 08	
		Amount of Each Disbursement this Period <input type="text" value="1000.00"/>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="4500.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. HEATHER WILSON FOR CONGRESS</b>		<b>Transaction ID:</b> SB23.5346
Mailing Address P.O. BOX 14070 P.O. BOX 14070		Date of Disbursement MM / DD / YYYY 09 / 05 / 2006
City ALBUQUERQUE	State NM	Zip Code 87191
Purpose of Disbursement Federal Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name HEATHER A. WILSON		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NM	District: 01	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. JD HAYWORTH FOR CONGRESS</b>		<b>Transaction ID:</b> SB23.5269
Mailing Address 14300 N. Northsight Blvd. #105		Date of Disbursement MM / DD / YYYY 09 / 05 / 2006
City Scottsdale	State AZ	Zip Code 85260
Purpose of Disbursement Federal Contribution		Amount of Each Disbursement this Period 2500.00
Candidate Name JD HAYWORTH		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: AZ	District: 5	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. JEFF FLAKE FOR CONGRESS</b>		<b>Transaction ID:</b> SB23.5402
Mailing Address PO Box 21447		Date of Disbursement MM / DD / YYYY 09 / 18 / 2006
City Mesa	State AZ	Zip Code 85277
Purpose of Disbursement federal contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name JEFF MR. FLAKE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: AZ	District: 06	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>4500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. JEFF FORTENBERRY FOR UNITED STATES CONGRESS</b>		<b>Transaction ID: SB23.5286</b> Date of Disbursement
Mailing Address 1620 N Street		<input type="text" value="09"/> / <input type="text" value="05"/> / <input type="text" value="2006"/>
City Lincoln	State NE	Zip Code 68508
Purpose of Disbursement federal contribution		<input type="text" value="011"/> Category/ Type
Candidate Name JEFFREY LANE FORTENBERRY		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NE	District: 01	

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial) <b>B. JIM GERLACH FOR CONGRESS COMMITTEE</b>		<b>Transaction ID: SB23.5351</b> Date of Disbursement
Mailing Address PO Box 87		<input type="text" value="09"/> / <input type="text" value="05"/> / <input type="text" value="2006"/>
City Uwchland	State PA	Zip Code 19480
Purpose of Disbursement federal contribution		<input type="text" value="011"/> Category/ Type
Candidate Name JIM GERLACH		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: PA	District: 06	

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial) <b>C. JIM JORDAN FOR CONGRESS</b>		<b>Transaction ID: SB23.5438</b> Date of Disbursement
Mailing Address 1709 State Route 560 South		<input type="text" value="09"/> / <input type="text" value="18"/> / <input type="text" value="2006"/>
City Urbana	State OH	Zip Code 43078
Purpose of Disbursement federal contribution		<input type="text" value="011"/> Category/ Type
Candidate Name JAMES D JORDAN		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH	District: 04	

Amount of Each Disbursement this Period

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="4500.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. JOHN T. DOOLITTLE FOR CONGRESS</b>		<b>Transaction ID: SB23.5295</b> Date of Disbursement
Mailing Address 2150 RIVER PLAZA DR. #150		<input type="text" value="09"/> / <input type="text" value="05"/> / <input type="text" value="2006"/>
City SACRAMENTO	State CA	Zip Code 95833
Purpose of Disbursement Federal Contribution		<input type="text" value="011"/> Category/ Type
Candidate Name JOHN DOOLITTLE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA	District: 4	

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial) <b>B. KELLER FOR CONGRESS</b>		<b>Transaction ID: SB23.5354</b> Date of Disbursement
Mailing Address P.O. Box 1453		<input type="text" value="09"/> / <input type="text" value="06"/> / <input type="text" value="2006"/>
City Orlando	State FL	Zip Code 32802
Purpose of Disbursement Federal Contribution		<input type="text" value="011"/> Category/ Type
Candidate Name RICHARD ANTHONY KELLER		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: FL	District: 08	

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial) <b>C. KLINE FOR CONGRESS</b>		<b>Transaction ID: SB23.5309</b> Date of Disbursement
Mailing Address 101 Burnsville Parkway Suite 104		<input type="text" value="09"/> / <input type="text" value="05"/> / <input type="text" value="2006"/>
City Burnsville	State MN	Zip Code 55337
Purpose of Disbursement federal contribution		<input type="text" value="011"/> Category/ Type
Candidate Name JOHN P KLINE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MN	District: 02	

Amount of Each Disbursement this Period

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="4500.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. KUHL FOR CONGRESS</b>		<b>Transaction ID: SB23.5312</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 5 / 2 0 0 6
Mailing Address 10 GANESVOORT STREET SUITE 101		Amount of Each Disbursement this Period 1000.00
City BATH State NY Zip Code 14810	Purpose of Disbursement Federal Contribution Candidate Name JOHN R JR KUHL Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 29	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Lamberti for Congress</b>		<b>Transaction ID: SB23.5357</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 4 / 2 0 0 6
Mailing Address PO Box 785		Amount of Each Disbursement this Period 1000.00
City Ankeny State IA Zip Code 50021	Purpose of Disbursement Federal Contribution Candidate Name Jeffrey Lamberti Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. LAMBORN FOR CONGRESS</b>		<b>Transaction ID: SB23.5381</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 4 / 2 0 0 6
Mailing Address 5170 NORTH UNION BLVD		Amount of Each Disbursement this Period 1000.00
City COLORADO SPRINGS State CO Zip Code 80918	Purpose of Disbursement federal contribution Candidate Name DOUGLAS L LAMBORN Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. LAVAR CHRISTENSEN FOR CONGRESS COMMITTEE</b>		<b>Transaction ID: SB23.5457</b> Date of Disbursement
Mailing Address 175 S. West Temple Suite 650		<input type="text" value="09"/> / <input type="text" value="21"/> / <input type="text" value="2006"/>
City Salt Lake City	State UT	Zip Code 84101
Purpose of Disbursement federal contribution	<input type="text" value="011"/> Category/ Type	
Candidate Name LAVAR CHRISTENSEN		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: UT District: 02		
		Amount of Each Disbursement this Period <input type="text" value="1000.00"/>

Full Name (Last, First, Middle Initial) <b>B. MAC COLLINS FOR CONGRESS</b>		<b>Transaction ID: SB23.5452</b> Date of Disbursement
Mailing Address P.O. Box 962		<input type="text" value="09"/> / <input type="text" value="20"/> / <input type="text" value="2006"/>
City Jackson	State GA	Zip Code 30233
Purpose of Disbursement federal contribution	<input type="text" value="011"/> Category/ Type	
Candidate Name MICHAEL ALLEN COLLINS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: GA District: 08		
		Amount of Each Disbursement this Period <input type="text" value="1000.00"/>

Full Name (Last, First, Middle Initial) <b>C. MCHENRY FOR CONGRESS</b>		<b>Transaction ID: SB23.5421</b> Date of Disbursement
Mailing Address PO BOX 360		<input type="text" value="09"/> / <input type="text" value="18"/> / <input type="text" value="2006"/>
City CHERRYVILLE	State NC	Zip Code 28021
Purpose of Disbursement Federal Contribution	<input type="text" value="011"/> Category/ Type	
Candidate Name PATRICK TIMOTHY MCHENRY		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NC District: 10		
		Amount of Each Disbursement this Period <input type="text" value="1000.00"/>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="3000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. MORAN FOR KANSAS</b>		Transaction ID: SB23.5411 Date of Disbursement																					
Mailing Address P.O. Box 1151		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	8		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		1	8		2	0	0	6														
City Hays	State KS	Zip Code 67601	Amount of Each Disbursement this Period																				
Purpose of Disbursement federal contribution		011	1000.00																				
Candidate Name JERRY MORAN		Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: KS District: 01																							

Full Name (Last, First, Middle Initial) <b>B. MUSGRAVE FOR CONGRESS</b>		Transaction ID: SB23.5267 Date of Disbursement																					
Mailing Address 5401 STONE CREEK CIRCLE SUITE 777		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	5		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		0	5		2	0	0	6														
City LOVELAND	State CO	Zip Code 80538	Amount of Each Disbursement this Period																				
Purpose of Disbursement Federal Contribution		011	2500.00																				
Candidate Name MARILYN N MUSGRAVE		Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: CO District: 04																							

Full Name (Last, First, Middle Initial) <b>C. NORTHUP FOR CONGRESS</b>		Transaction ID: SB23.5293 Date of Disbursement																					
Mailing Address PO Box 7313		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	5		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		0	5		2	0	0	6														
City Louisville	State KY	Zip Code 40257	Amount of Each Disbursement this Period																				
Purpose of Disbursement Federal Contribution		011	2500.00																				
Candidate Name ANNE M NORTHUP		Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: KY District: 03																							

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	6000.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. NORWOOD FOR CONGRESS</b>		<b>Transaction ID: SB23.5415</b> Date of Disbursement 09 / 18 / 2006
Mailing Address PO Box 499 PO BOX 499		Amount of Each Disbursement this Period 1000.00
City Evans State GA Zip Code 30809	Purpose of Disbursement federal contribution Candidate Name CHARLES WHITLOW NORWOOD Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 10 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. PEOPLE WITH HART INC</b>		<b>Transaction ID: SB23.5306</b> Date of Disbursement 09 / 05 / 2006
Mailing Address P.O. Box 435		Amount of Each Disbursement this Period 1000.00
City Wexford State PA Zip Code 15090	Purpose of Disbursement Federal Contribution Candidate Name MELISSA A. HART Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 04 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. PORTER FOR CONGRESS</b>		<b>Transaction ID: SB23.5333</b> Date of Disbursement 09 / 05 / 2006
Mailing Address PO Box 26087		Amount of Each Disbursement this Period 1000.00
City Las Vegas State NV Zip Code 89126	Purpose of Disbursement Federal contributon Candidate Name JON C SR PORTER Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 03 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. RALPH NORMAN FOR CONGRESS</b>		<b>Transaction ID: SB23.5388</b> Date of Disbursement
Mailing Address P O Box 36335		<input type="text" value="09"/> / <input type="text" value="14"/> / <input type="text" value="2006"/>
City ROCK HILL	State SC	Zip Code 29732
Purpose of Disbursement federal contribution	<input type="text" value="011"/> Category/ Type	
Candidate Name RALPH W MR. JR NORMAN		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: SC District: 05		
		Amount of Each Disbursement this Period <input type="text" value="1000.00"/>

Full Name (Last, First, Middle Initial) <b>B. RAY MEIER FOR CONGRESS COMMITTEE</b>		<b>Transaction ID: SB23.5360</b> Date of Disbursement
Mailing Address PO Box 120		<input type="text" value="09"/> / <input type="text" value="14"/> / <input type="text" value="2006"/>
City Utica	State NY	Zip Code 13503
Purpose of Disbursement federal contribution	<input type="text" value="011"/> Category/ Type	
Candidate Name RAYMOND MEIER		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NY District: 24		
		Amount of Each Disbursement this Period <input type="text" value="1000.00"/>

Full Name (Last, First, Middle Initial) <b>C. REHBERG FOR CONGRESS</b>		<b>Transaction ID: SB23.5301</b> Date of Disbursement
Mailing Address P.O. Box 1597		<input type="text" value="09"/> / <input type="text" value="05"/> / <input type="text" value="2006"/>
City Helena	State MT	Zip Code 59624
Purpose of Disbursement Federal Contribution	<input type="text" value="011"/> Category/ Type	
Candidate Name DENNIS R REHBERG		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MT District: 1		
		Amount of Each Disbursement this Period <input type="text" value="1000.00"/>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="3000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

**A. RICHARD POMBO FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address 2150 RIVER PLAZA DR. #150 SUITE 1560

City SACRAMENTO State CA Zip Code 95833

Purpose of Disbursement  
Federal Contribution

Candidate Name  
RICHARD POMBO

Office Sought:  House  Senate  President  
State: CA District: 11

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23.5290  
Date of Disbursement

09 / 05 / 2006

Amount of Each Disbursement this Period

2500.00

**B. RICK RENZI FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. Box 2383

City Prescott State AZ Zip Code 86302

Purpose of Disbursement  
Federal Contribution

Candidate Name  
RICHARD GEORGE RENZI

Office Sought:  House  Senate  President  
State: AZ District: 01

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23.5328  
Date of Disbursement

09 / 05 / 2006

Amount of Each Disbursement this Period

2500.00

**C. RON LEWIS FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 307

City Elizabethtown State KY Zip Code 42702

Purpose of Disbursement  
Federal Contribution

Candidate Name  
RON LEWIS

Office Sought:  House  Senate  President  
State: KY District: 02

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23.5298  
Date of Disbursement

09 / 05 / 2006

Amount of Each Disbursement this Period

2500.00

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

7500.00

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. ROSKAM FOR CONGRESS COMMITTEE</b>		<b>Transaction ID: SB23.5366</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 4 / 2 0 0 6
Mailing Address 423 W. Wesley Street		Amount of Each Disbursement this Period 1000.00
City Wheaton State IL Zip Code 60189	011 Category/ Type	
Purpose of Disbursement Federal Contribution		
Candidate Name PETER ROSKAM		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 6	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. RYAN FOR CONGRESS</b>		<b>Transaction ID: SB23.5425</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 8 / 2 0 0 6
Mailing Address P. O. Box 1919 P. O. Box 1919		Amount of Each Disbursement this Period 1000.00
City Janesville State WI Zip Code 53547	011 Category/ Type	
Purpose of Disbursement federal contribution		
Candidate Name PAUL D RYAN		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 01	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. SALI FOR CONGRESS</b>		<b>Transaction ID: SB23.5392</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 4 / 2 0 0 6
Mailing Address PO Box 71		Amount of Each Disbursement this Period 1000.00
City KUNA State ID Zip Code 83634	011 Category/ Type	
Purpose of Disbursement federal contribution		
Candidate Name WILLIAM T. SALI		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ID District: 01	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. SCOTT GARRETT FOR CONGRESS</b>		<b>Transaction ID:</b> SB23.5408 Date of Disbursement
Mailing Address P.O. Box 905		<input type="text" value="09"/> / <input type="text" value="18"/> / <input type="text" value="2006"/>
City Newton	State NJ	Zip Code 07860
Purpose of Disbursement federal contribution	<input type="text" value="011"/> Category/ Type	
Candidate Name SCOTT GARRETT		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NJ District: 05		
		Amount of Each Disbursement this Period <input type="text" value="1000.00"/>

Full Name (Last, First, Middle Initial) <b>B. SHELLEY SEKULA-GIBBS FOR CONGRESS CAMPAIGN COMMITTEE</b>		<b>Transaction ID:</b> SB23.5466 Date of Disbursement
Mailing Address PO BOX 890954		<input type="text" value="09"/> / <input type="text" value="21"/> / <input type="text" value="2006"/>
City HOUSTON	State TX	Zip Code 77289
Purpose of Disbursement federal contribution	<input type="text" value="011"/> Category/ Type	
Candidate Name SHELLEY MD SEKULA-GIBBS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: TX District: 22		
		Amount of Each Disbursement this Period <input type="text" value="1000.00"/>

Full Name (Last, First, Middle Initial) <b>C. SOUDER FOR CONGRESS INC.</b>		<b>Transaction ID:</b> SB23.5473 Date of Disbursement
Mailing Address P.O. BOX 40233 P.O. BOX 40233		<input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2006"/>
City FORT WAYNE	State IN	Zip Code 46804
Purpose of Disbursement federal contribution	<input type="text" value="011"/> Category/ Type	
Candidate Name MARK E SOUDER		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IN District: 03		
		Amount of Each Disbursement this Period <input type="text" value="2500.00"/>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="4500.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. STEVE CHABOT FOR CONGRESS</b>		<b>Transaction ID:</b> SB23.5262 Date of Disbursement
Mailing Address 3339 Harrison Ave. 3014 Harrison Ave.		<input type="text" value="09"/> / <input type="text" value="05"/> / <input type="text" value="2006"/>
City Cincinnati	State OH	Zip Code 45211
Purpose of Disbursement Federal Contribution		<input type="text" value="011"/> Category/ Type
Candidate Name STEVE CHABOT		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH	District: 01	

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial) <b>B. SUE MYRICK FOR CONGRESS</b>		<b>Transaction ID:</b> SB23.5431 Date of Disbursement
Mailing Address P.O. Box 37091		<input type="text" value="09"/> / <input type="text" value="18"/> / <input type="text" value="2006"/>
City Charlotte	State NC	Zip Code 28237
Purpose of Disbursement federal contribution		<input type="text" value="011"/> Category/ Type
Candidate Name SUE MYRICK		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NC	District: 09	

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial) <b>C. SWEENEY FOR CONGRESS INC</b>		<b>Transaction ID:</b> SB23.5342 Date of Disbursement
Mailing Address Post Office Box 1465		<input type="text" value="09"/> / <input type="text" value="05"/> / <input type="text" value="2006"/>
City Clifton Park	State NY	Zip Code 12065
Purpose of Disbursement federal contribution		<input type="text" value="011"/> Category/ Type
Candidate Name JOHN E. SWEENEY		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NY	District: 20	

Amount of Each Disbursement this Period

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="4500.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. THELMA DRAKE FOR CONGRESS</b>		<b>Transaction ID: SB23.5274</b> Date of Disbursement
Mailing Address P.O. Box 61480		<input type="text" value="09"/> / <input type="text" value="05"/> / <input type="text" value="2006"/>
City Virginia Beach	State VA	Zip Code 23466
Purpose of Disbursement Federal Contribution	<input type="text" value="011"/> Category/ Type	
Candidate Name THELMA D DRAKE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: VA	District: 02	
		Amount of Each Disbursement this Period <input type="text" value="2500.00"/>

Full Name (Last, First, Middle Initial) <b>B. TODD AKIN FOR CONGRESS</b>		<b>Transaction ID: SB23.5393</b> Date of Disbursement
Mailing Address PO BOX 31222		<input type="text" value="09"/> / <input type="text" value="18"/> / <input type="text" value="2006"/>
City ST LOUIS	State MO	Zip Code 63131
Purpose of Disbursement federal contribution	<input type="text" value="011"/> Category/ Type	
Candidate Name WILLIAM TODD AKIN		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MO	District: 02	
		Amount of Each Disbursement this Period <input type="text" value="1000.00"/>

Full Name (Last, First, Middle Initial) <b>C. TOM FEENEY FOR CONGRESS</b>		<b>Transaction ID: SB23.5399</b> Date of Disbursement
Mailing Address 1420 Alafaya Trail #103		<input type="text" value="09"/> / <input type="text" value="18"/> / <input type="text" value="2006"/>
City Oviedo	State FL	Zip Code 32765
Purpose of Disbursement federal contribution	<input type="text" value="011"/> Category/ Type	
Candidate Name TOM FEENEY		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: FL	District: 24	
		Amount of Each Disbursement this Period <input type="text" value="1000.00"/>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="4500.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. VAN TAYLOR FOR CONGRESS</b>		<b>Transaction ID: SB23.5385</b> Date of Disbursement
Mailing Address P.O. Box 485		<input type="text" value="09"/> / <input type="text" value="14"/> / <input type="text" value="2006"/>
City Waco	State TX	Zip Code 76703
Purpose of Disbursement federal contribution	<input type="text" value="011"/> Category/ Type	
Candidate Name NICHOLAS VANCAMPEN TAYLOR		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: TX	District: 17	

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial) <b>B. WALBERG FOR CONGRESS</b>		<b>Transaction ID: SB23.5376</b> Date of Disbursement
Mailing Address 6769 Teachout Road		<input type="text" value="09"/> / <input type="text" value="14"/> / <input type="text" value="2006"/>
City Tipton	State MI	Zip Code 49287
Purpose of Disbursement federal contribution	<input type="text" value="011"/> Category/ Type	
Candidate Name TIMOTHY WALBERG		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MI	District: 07	

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial) <b>C. WELDON VICTORY COMMITTEE</b>		<b>Transaction ID: SB23.5330</b> Date of Disbursement
Mailing Address P. O. Box 1992		<input type="text" value="09"/> / <input type="text" value="05"/> / <input type="text" value="2006"/>
City Media	State PA	Zip Code 19063
Purpose of Disbursement federal contribution	<input type="text" value="011"/> Category/ Type	
Candidate Name CURTIS W. WELDON		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: PA	District: 7	

Amount of Each Disbursement this Period

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="3000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 53 / 53

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. WHALEN FOR CONGRESS</b>		Transaction ID: SB23.5363 Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2006	
Mailing Address P. O. Box 750		Amount of Each Disbursement this Period 1000.00	
City Bettendorf	State IA	Zip Code 52722	011 Category/ Type
Purpose of Disbursement Federal Contribution			
Candidate Name MICHAEL LOUIS Louis WHALEN			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: IA	District: 01		

SUBTOTAL of Disbursements This Page (optional) ..... ▶

1000.00

TOTAL This Period (last page this line number only) ..... ▶

109000.00